

The logo for Kalamazoo County Government is a shield-shaped emblem. It features a blue sky at the top, a green field in the middle, and a blue river at the bottom. In the background, there are yellow trees and a grey city skyline. The text "KALAMAZOO COUNTY GOVERNMENT" is written in a semi-circle above the shield.

# Board of Commissioners' Meeting

February 2, 2016

**NOTICE AND AGENDA FOR  
FEBRUARY 2, 2016 MEETING  
OF THE  
KALAMAZOO COUNTY BOARD OF COMMISSIONERS**

**PLEASE TAKE NOTICE** that a regular meeting of the Kalamazoo County Board of Commissioners is scheduled for **Tuesday, February 2, 2016, at 7:00 p.m.** in the Board of Commissioners Room, second floor, County Administration Building, 201 West Kalamazoo Avenue, Kalamazoo, Michigan, for the purpose of considering the following items:

- ITEM 1      Call to Order
- ITEM 2      Invocation
- ITEM 3      Pledge of Allegiance
- ITEM 4      Roll Call
- ITEM 5      Approval of Minutes
- ITEM 6      Communications
- ITEM 7      Citizens' Time
- ITEM 8      For Consideration

- A.      Request for Approval of a Resolution Honoring Herman Smith
- B.      Michigan Local Public Health Accreditation Program Presentation for Health & Community Services Department

**CONSENT AGENDA**

Airport

- C.      Request for Approval of Elimination/Creation of Positions (Airport funds - housekeeping)

Circuit Court

- D.      Request for Approval of an Agreement with PRAXIS Consulting, Inc.

District Court

- E.      Request for Approval of a Contract Amendment with Ronald Teesdale

Finance

- F.      Request for Approval of Creation of Positions (housekeeping)

Health & Community Services

- G.      Request for Approval of Household Hazardous Waste Program Contract with Multiple Townships and Municipalities
- H.      Request for Approval of Amendment #1 to the Agreement with the Student Health Center at Kalamazoo College
- I.      Request for Approval of Creation of Position in the Breast & Cervical Cancer Control Navigation Program (BCCCNP) (grant funds)
- J.      Request for Approval to Submit a Grant Application to the Kalamazoo County Health Plan for STD Community Collaboration

Human Resources

- K. Request for Approval of Amendment to Personnel Policy 4.03 – Overtime Pay Policy
- L. Request for Approval of Amendment to Personnel Policy 7.03 – Weapons Policy
- M. Request for Approval of Recruitment Advertising Agreement with MLive Media Group
- N. Request for Approval of Kalamazoo County Government Flexible Benefit Plan

Michigan Works!

- O. Request for Approval of Appointment to Workforce Development Board

Planning & Community Development

- P. Request for Approval of a Resolution Honoring Jack Mekemson

Prosecuting Attorney

- Q. Request for Approval of FY 2015-2016 SWET Byrne Justice Assistance Grant (JAG) Program Subcontract

Sheriff

- R. Request for Approval of Verizon Networkfleet Management Contract

Board of Commissioners

- S. Request for Approval of Transfers and Disbursements
- T. Request for Approval of Resolution in Support of Black History Month
- U. Request for Approval of Amendment to Board Bylaws
- V. Request for Approval of the ADA Policy and the Appointment of the County Administrator as the ADA Compliance Officer
- W. Request for Approval of Resolution for Millage Renewal Proposition for Countywide Law Enforcement

**NON-CONSENT AGENDA ITEMS**

**The following Items are Non-Consent Agenda Items and will be voted on individually.**

- ITEM 9 Old Business
- ITEM 10 New Business
- ITEM 11 County Administrator's Report
- ITEM 12 Chairperson's Report
- ITEM 13 Vice Chairperson's Report
- ITEM 14 Members' Time
- ITEM 15 Adjournment

*Dina Sutton*

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Dina Sutton  
Office Manager for Administrative Services

JANUARY 27, 2016

MEETINGS OF THE KALAMAZOO COUNTY BOARD OF COMMISSIONERS ARE OPEN TO ALL WITHOUT REGARD TO RACE, SEX, COLOR, AGE, NATIONAL ORIGIN,

RELIGION, HEIGHT, WEIGHT, MARITAL STATUS, POLITICAL AFFILIATION, SEXUAL ORIENTATION, GENDER IDENTITY OR DISABILITY. KALAMAZOO COUNTY WILL PROVIDE NECESSARY REASONABLE AUXILIARY AIDS AND SERVICES, SUCH AS SIGNERS FOR THE HEARING IMPAIRED AND AUDIO TAPES OF PRINTED MATERIALS BEING CONSIDERED AT THE MEETING/HEARING, TO INDIVIDUALS WITH DISABILITIES AT THE MEETING/HEARING UPON FOUR (4) BUSINESS DAYS' NOTICE TO THE COUNTY. INDIVIDUALS WITH DISABILITIES REQUIRING AUXILIARY AIDS OR SERVICES SHOULD CONTACT THE COUNTY BY WRITING OR CALLING:

Dina Sutton  
Office Manager for Administrative Services  
KALAMAZOO COUNTY GOVERNMENT  
201 West Kalamazoo Avenue  
Kalamazoo, Michigan 49007  
TELEPHONE: (269)384-8111

A./P.

**BOARD AGENDA REQUEST FORM**

PROPOSED FOR BOARD MEETING OF: February 2, 2016

DEPARTMENT: Planning & Community Development

PREPARED BY: Lotta Jarnefelt

SUBJECT: Resolutions to honor Mr. Herman Smith and Mr. Jack Mekemson for their service as Kalamazoo Metropolitan County Planning Commission (KMCP) members for 17 and 18 years, respectively.

SPECIFIC ACTION REQUESTED:

Approve resolutions to honor Mr. Smith and Mr. Mekemson

DESCRIPTION OF ACTION (dollar amount, purpose):

Mr. Smith has been a member of the KMCP from March 3, 1998 through October 2015.

Mr. Mekemson has been a member of the KMCP from September 9, 1997 through May 2015.

In its meeting on January 7, 2016, the KMCP approved a resolution that included the following:

KMCP thanked Mr. Smith and Mr. Mekemson for their long service to the KMCP; and

KMCP recommends to the County Commission that they express their gratitude for Mr. Smith's and Mr. Mekemson's service; and

that a copy of these Resolutions be delivered to Mr. Smith and Mr. Mekemson.

Resolutions have been prepared for the County Board of Commissioners as recommended by the KMCP resolution.

TIME FRAME OF ACTION:

NA

FUNDING SOURCE IF REQUIRED (Federal, State, or Local):

NA

PERSONNEL IF REQUIRED:

None

CONTACT PERSON WITH PHONE NUMBER:

If you have any questions or comments, please call 384-8115 or email [LMJARN@KALCOUNTY.COM](mailto:LMJARN@KALCOUNTY.COM)



**RESOLUTION HONORING**

**Mr. Herman Smith**

**WHEREAS**, Mr. Herman Smith has served with distinction on the Kalamazoo Metropolitan County Planning Commission (KMPC) from 1998 to 2015; and

**WHEREAS**, Mr. Smith served as the KMPC Vice-Chair for several years; and

**WHEREAS**, during Mr. Smith's time on the commission, the Kalamazoo Metropolitan County Planning Commission has diligently performed its role in supporting the future development of Kalamazoo County; and

**WHEREAS**, Mr. Smith helped promote sound land use planning throughout the County, protecting the historic and agricultural nature of the County; and

**WHEREAS**, we are better for his service; and

**NOW, THEREFORE, BE IT RESOLVED** that the Kalamazoo County Board of Commissioners does hereby recognize, with sincerest respect, the fine accomplishments of Mr. Smith and is deeply appreciative of all his many contributions to the Kalamazoo County Community.

STATE OF MICHIGAN            )  
  ) SS  
COUNTY OF KALAMAZOO        )

I, Timothy A. Snow, County Clerk/Register, do hereby certify that the foregoing is a true copy of a Resolution adopted by the Kalamazoo County Board of Commissioners at a regular session held on February 2, 2016.

\_\_\_\_\_  
Timothy A. Snow  
County Clerk/Register

C.

**BOARD AGENDA REQUEST FORM**

**PROPOSED FOR BOARD MEETING OF:** February 2, 2016

**DEPARTMENT:** Airport

**PREPARED BY:** David Reid, A.A.E

**SUBJECT:** 2016 Budgetary Position Changes

**SPECIFIC ACTION REQUESTED:**

Housekeeping item to due position movements in the approved 2016 budget.

**DESCRIPTION OF ACTION (dollar amount, purpose):**

**TIME FRAME OF ACTION:**

Effective upon board approval.

**FUNDING SOURCE IF REQUIRED (Federal, State, or Local):**

Airport Funds.

**PERSONNEL IF REQUIRED:**

Eliminate:

Fund	Position #	Job Title	Grade	FTE	Salary Range
581-583	10449-003	Operations Technician	R10	1.0	\$29,640.00-31,969.60
581-583	10449-006	Operations Technician	R10	1.0	\$29,640.00-31,969.60
581-584	10449-004	Operations Technician	R10	1.0	\$29,640.00-31,969.60

Create:

Fund	Position #	Job Title	Grade	FTE	Salary Range
581-582	10449-003	Operations Technician	R10	1.0	\$29,640.00-31,969.60
581-582	10449-006	Operations Technician	R10	1.0	\$29,640.00-31,969.60
581-582	10449-004	Operations Technician	R10	1.0	\$29,640.00-31,969.60

**NEW OR RENEWAL OR AMENDMENT:**

N/A

**ANY OTHER PERTINENT INFORMATION:**

**PROCUREMENT INFORMATION:**

**CONTACT PERSON WITH PHONE NUMBER:** David Reid, A.A.E or Amanda Woodin 388-3668

**BOARD AGENDA REQUEST FORM**

**PROPOSED FOR BOARD MEETING OF:** February 2, 2016

**DEPARTMENT:** 9<sup>th</sup> Circuit Court, 8<sup>th</sup> District Court, and the Kalamazoo County Probate Court

**PREPARED BY:** Justin J. Clark

**SUBJECT:** Kalamazoo County Courts Request to Contract with Dr. Brenda J. Wagenknecht-Ivey, CEO, PRAXIS Consulting, Inc.

**SPECIFIC ACTION REQUESTED:**

Board approval and signature is requested on the attached Agreement between PRAXIS Consulting, Inc., the 9<sup>th</sup> Circuit Court, the 8<sup>th</sup> District Court, and the Kalamazoo Probate County Probate Court.

**DESCRIPTION OF ACTION (dollar amount, purpose):**

The proposed agreement with PRAXIS Consulting, Inc. will allow the Kalamazoo County Courts to work with Dr. Brenda J. Wagenknecht-Ivey and her consulting team to help the Court's leadership critically evaluate the current structure and operations, and develop and implement a plan to better use and coordinate scarce resources, enhance services, streamline processes, implement technological advances, and ensure financial stability.

**TIME FRAME OF ACTION:**

This project will be completed within one year from the start date. The project has been broken down into 4 tasks.

**Task 1: Kick-Off Meeting to Design the Planning Process**

- Timeframe: 1 month

**Task 2: Conduct outreach to gather information to assist with the planning an reengineering process**

- Timeframe: 2-4 months immediately after the Kick-Off Meeting

**Task 3: Develop a long term plan for the Courts in Kalamazoo**

- Timeframe: 4 months immediately following Task 2 setting 1-2 8 hour meetings per month

**Task 4: Communicate and Implement the Court's Plan and Priorities**

- 2 months immediately following Task 3

**FUNDING SOURCE IF REQUIRED (Federal, State, or Local):**

\$47,800.00 will be paid by SJI (State Justice Institute) funds that have been allocated for this project. The remaining \$27,830.00 will be paid equally by the Kalamazoo County Courts (Circuit, District, and Probate).

**PERSONNEL IF REQUIRED:**

N/A

**NEW OR RENEWAL OR AMENDMENT:**

This is a new contract.

**ANY OTHER PERTINENT INFORMATION:**

The Courts have chosen to utilize Brenda J. Wagenknecht-Ivey, and her PRAXIS Consulting team based on her previous experience. She has consulted with and facilitated more than 125 strategy and organizational improvement and change processes with the private and public sectors over the past 20 years. She is a Michigan native and a nationally recognized expert in this area. In particular, in the early 1990's with funding from the State Justice Institute, she and her colleagues developed the first strategic planning model for courts. She has continued to revise and update this model since that time, using it successfully with courts and criminal justice system organizations across the United States and internationally. She is a leader in strategic thinking and facilitating engaging processes that help court leaders develop and implement long-term planning.

**PROCUREMENT INFORMATION:**

This Technical Assistance Grant, along with the matched funds were granted and agreed to based on specifically seeking the services of Brenda J. Wagenknecht-Ivey and PRAXIS Consulting, Inc.

**CONTACT PERSON WITH PHONE NUMBER:**

Suzanne M. Darling, Circuit Court Administrator  
Phone Number: (269) 383-8928  
Email: SMDarl@kalcounty.com

E.

**BOARD AGENDA REQUEST FORM**

**PROPOSED FOR BOARD MEETING OF:** February 3, 2016

**DEPARTMENT:** 8<sup>th</sup> District Court

**PREPARED BY:** Ann E. Filkins, Court Administrator

**SUBJECT:** Approval of amended contract between County of Kalamazoo, 8<sup>th</sup> District Court and Ronald Teesdale.

**SPECIFIC ACTION REQUESTED:**

Approval of contract between County of Kalamazoo, 8<sup>th</sup> District Court and Ronald Teesdale for private courier service of daily deposits from each court location to County Treasurer.

**DESCRIPTION OF ACTION (dollar amount, purpose):**

Cost is to be \$75 per day/two times per week.

**TIME FRAME OF ACTION:**

Amended Contract March 3, 2016 to March 2, 2017.

**FUNDING SOURCE IF REQUIRED (Federal, State, or Local):**

Funded through District Court budget.

**PERSONNEL IF REQUIRED:**

(indicate if elimination or creation and list FTE; job title; grade; full-time salary range; account number; and, if known, position number)

One position private contractor per contract.

**NEW OR RENEWAL:**

Renewal.

**ANY OTHER PERTINENT INFORMATION:**

**PROCUREMENT INFORMATION:**

(indicate if the contract was bid out, if not, state reason(s) why; indicate last time contract was bid out; indicate if awarded bidder was the lowest bidder, if not, indicate why)

This contract was not bid out. Ronald Teesdale is a retired Portage Police Officer.

**CONTACT PERSON WITH PHONE NUMBER:**

Ann E. Filkins, Court Administrator 269-384-8166

**BOARD AGENDA REQUEST FORM**

**PROPOSED FOR BOARD MEETING OF:** February 2, 2016

**DEPARTMENT:** Finance

**PREPARED BY:** Tracie Moored

**SUBJECT:** 2016 Budget – Housekeeping Position Creation

**SPECIFIC ACTION REQUESTED:**

Housekeeping item necessary due to a position creation approved with the 2016 budget.

**DESCRIPTION OF ACTION (dollar amount, purpose):**

**TIME FRAME OF ACTION:**

Effective 1/1/2016.

**FUNDING SOURCE IF REQUIRED (Federal, State, or Local):**

**PERSONNEL IF REQUIRED:**

(Indicate if elimination or creation and list FTE; job title; grade; full-time salary range; account number; and, if known, position number)

Create:

<b>Fund &amp; Activity</b>	<b>Position #</b>	<b>Position Title</b>	<b>Band</b>	<b>FTE</b>	<b>Salary</b>
101-614	TBD	Administrative Assistant	K04	0.5	\$13,650.00
221-222	TBD	Administrative Assistant	K04	0.5	\$13,650.00

**NEW OR RENEWAL:**

**ANY OTHER PERTINENT INFORMATION:**

**PROCUREMENT INFORMATION:**

(indicate if the contract was bid out, if not, state reason(s) why; indicate last time contract was bid out; indicate if awarded bidder was the lowest bidder, if not, indicate why)

**CONTACT PERSON WITH PHONE NUMBER:** Tracie Moored 384-8090



G.-J.

**KALAMAZOO COUNTY  
HEALTH AND COMMUNITY SERVICES DEPARTMENT**

*Promoting Health For All*

**DATE:** February 2, 2016  
**TO:** County Board of Commissioners  
**FROM:** Gillian A. Stoltman, Ph.D, M.P.H, Director/Health Officer  
**RE:** **ITEMS FOR YOUR CONSIDERATION**

**A. APPROVAL OF HOUSEHOLD HAZARDOUS WASTE PROGRAM  
CONTRACTS WITH MULTIPLE TOWNSHIPS AND MUNICIPALITIES**

**ACTION REQUIRED**

HCS Administration requests Board approval of the following contracts between the county governmental units listed below (both in and out-of-county units) and Kalamazoo County Health and Community Services Department for the Household Hazardous Waste Program. These contracts are for the period of January 1, 2016 to December 31, 2016 and establish each unit's funding for fiscal year 2016.

**GOVERNMENTAL UNITS AND FUNDING**

- |                        |           |
|------------------------|-----------|
| 1. Augusta, Village of | \$ 500    |
| 2. Berrien County      | \$ 1,500  |
| 3. Brady Township      | \$ 2,500  |
| 4. Oshtemo Township    | \$ 12,000 |
| 5. Portage, City of    | \$ 32,000 |

**DESCRIPTION OF SUBJECT**

The County will provide collection services to each unit's residents at the Household Hazardous Waste Center as long as that unit has funds on account with the County to cover the costs of their citizen's utilization of the service. These contracts adhere to the Household Hazardous Waste fees for FY16 that were approved by the Board on November 17, 2015 for the purpose of supporting Household Hazardous Waste program operations, including ten (10) Saturdays throughout the fiscal year.

**RELATIONSHIP TO GOALS**

These contracts will allow the collection of household hazardous waste in 2016 from each unit's residents and will allow removal of household hazardous waste from the waste stream, thus preventing environmental contamination problems. This program is consistent with the HCS's goal to improve the quality and safety of the physical environment for Kalamazoo County residents.

**FUNDING SOURCE**

Funding amounts for each governmental unit are listed above. Each of the in-county amendments includes a specific amount for operational expenses, which is based upon a cost-sharing formula. Both in-county and out-county are charged based on actual participation by individual households. Out-of-county municipalities are charged for actual participation plus a \$34.00 service fee per household. If the funds for a unit are exhausted before the contract period ends, that unit's residents will not receive collection services unless more funds are transferred to the County.

### **PERSONNEL**

There are no new personnel associated with this item.

### **PROCUREMENT**

There is no procurement associated with this request.

### **ISSUES/CONCERNS**

There are no issues or concerns. If you have any questions, please contact Vern Johnson, Environmental Health Division Manager, at 373-5356 / [vljohn@kalcounty.com](mailto:vljohn@kalcounty.com) or Lynne Norman, Deputy Director – Health Services, at 373-5237 / [ldnorm@kalcounty.com](mailto:ldnorm@kalcounty.com)

## **B. APPROVAL OF AMENDMENT #1 TO THE AGREEMENT WITH THE STUDENT HEALTH CENTER AT KALAMAZOO COLLEGE FOR HCS LABORATORY SERVICES**

### **ACTION REQUESTED**

HCS Administration requests Board approval of amendment #1 to the agreement for laboratory services with Kalamazoo College Student Health Center. The agreement term is July 1, 2013 with automatic annual renewal. The original agreement was approved by the Board on June 18, 2013.

### **DESCRIPTION OF SUBJECT**

HCS's Public Health Laboratory provides clinical laboratory services, specifically Chlamydia and Neisseria gonorrhoea testing to the Student Health Center at Kalamazoo College. The original laboratory agreement sets the terms and standards for the arrangement and this amendment #1 amends the Laboratory fees to maintain consistency with current laboratory fee rates as approved by the Board on December 15, 2015.

### **RELATIONSHIP TO GOALS**

This agreement and partnership further supports the HCS goal to improve the overall health of the community by reducing preventable diseases and through the promotion of healthy lifestyles and choices.

### **FUNDING SOURCE**

This is a fee for service agreement and HCS will receive reimbursement at the department's established fee rates.

### **PERSONNEL**

There are no new personnel associated with this request.

### **PROCUREMENT**

There is no procurement associated with this request.

### **ISSUES/CONCERNS**

There are no issues or concerns. If you have any questions please contact Aaron Hoogenboom, Lab Manager at 373-5077 / [awhoog@kalcouny.com](mailto:awhoog@kalcouny.com) or Lynne Norman, Deputy Director – Health Services, at 373-5237 / [ldnorm@kalcouny.com](mailto:ldnorm@kalcouny.com)

## **C. POSITION CREATION IN THE HEALTH & COMMUNITY SERVICES DEPARTMENT – BREAST & CERVICAL CANCER CONTROL NAVIGATION (BCCCNP) PROGRAM**

### **ACTION REQUESTED**

HCS Administration requests Board approval to create .5 FTE Community Health Worker position within the Breast and Cervical Cancer Control Navigation Program.

### **DESCRIPTION OF SUBJECT**

The Breast and Cervical Cancer Control Navigation Program (BCCCNP) is a Center for Disease Control and Prevention (CDC) funded program under Title XV, which seeks to reduce the unacceptably high prevalence of breast and cervical cancer among poor women in the country. Kalamazoo County Health and Community Services Department serves as the Local Coordinating Agency for an eight county region by contracting with medical providers who serve the targeted population. An increasing number of customers in need of services are Hispanic or Latino, necessitating bilingual English/Spanish speaking staff to provide outreach to these and other minority communities. A requirement, as outlined in the Community Health Worker position description, is that candidates for this position have oral fluency in both English and Spanish in order to help the BCCCNP meet this growing need.

### **RELATIONSHIP TO GOALS**

This change is consistent with the HCS goal to improve the overall health of the community by reducing preventable disabilities and death, and promoting healthy lifestyles and choices.

**FUNDING SOURCE**

No County funds are required as a result of this request. Funding to support the position creation is allocated through the Comprehensive Budget (formerly CPBC) funds from Michigan Department of Health & Human Services.

**PERSONNEL**

Create:

<u>Account#</u>	<u>Position/#</u>	<u>Grade</u>	<u>FTE</u>	<u>Pay Range</u>	<u>Effective</u>
317-150	Community Health Worker # TBD - NEW	K05	.5	\$15,225 - \$20,550	3/1/2016

**PROCUREMENT**

There is no procurement associated with this request.

**ISSUES/CONCERNS**

There are no issues or concerns. If you have questions please contact Lynn Ann Jones, Women's Health Supervisor, at 373-5383 / [lajone@kalamazoo.org](mailto:lajone@kalamazoo.org) or Ryan Post, Deputy Director Financial Management & Administration, at 373-5254 / [rjpost@kalamazoo.org](mailto:rjpost@kalamazoo.org)

**D. GRANT APPLICATION TO THE KALAMAZOO COUNTY HEALTH PLAN FOR STD COMMUNITY COLLABORATION**

**ACTION REQUESTED**

HCS Administration requests Board approval to submit a grant proposal to the Kalamazoo County Health Plan for funding the Sexually Transmitted Disease (STD) Coalition that has been created to reduce STD rates in Kalamazoo County residents. The total request is for \$100,000. The grant application is due on February 9, 2016.

**DESCRIPTION OF SUBJECT**

Kalamazoo County is experiencing an increase in STD rates. In Michigan, the 2014 rate of gonorrhea was 97.5 cases per 100,000 and Chlamydia was 452.5 cases per 100,000. In Kalamazoo County the rates are markedly higher at 255.0 cases per 100,000 for gonorrhea and 791.3 per 100,000 for Chlamydia. To address these rising rates HCS has hired an STD Health Coordinator who is tasked with cultivating collaborations and coordinating communitywide initiatives to decrease the rates of sexually transmitted diseases in residents of Kalamazoo County.

This grant would provide funding to enhance the newly created STD Coalition comprised of medical professionals, educators, faith based organizations and other community partners. The funding would be used to purchase evidenced based, culturally competent STD educational programs for adolescent through teen age years. Partnerships will be formed with community and faith based groups that host targeted ages. The partnerships will further explore best practices for communication options to convey unified STD messaging throughout the community.

### **RELATIONSHIP TO GOALS**

The activities of the STD Health Coordinator are consistent with the HCS goal of improving the overall health and wellbeing of the community by reducing preventable disabilities and deaths and promoting healthy lifestyles and choices.

### **FUNDING SOURCE**

The Kalamazoo County Health Plan is the sole funding source for this request. No additional county general funds are requested for this project, it is solely grant funded. Acceptance of this funding will include rent and central service costs as a part of the operating budget. This is a 3-year award only; there is not provision for continuation of funding after that period.

### **PERSONNEL**

The STD Health Coordinator is currently a 0.75 FTE position. If this grant is approved, that position would be increased to 1.0 FTE for the 3-year timeframe of the grant. The current employee in this position understands that the FTE increase is a result of the grant funding and will revert back to a .75 FTE after the 3-year grant period. No additional County employees are required for this project.

### **ISSUES/CONCERNS**

If you have any questions or concerns regarding the above requested action, please contact Lynne Norman, RN, MPH, Deputy Director – Health Services at [ldnorm@kalcounty.com](mailto:ldnorm@kalcounty.com) or 269-373-5237.

K.

## BOARD AGENDA REQUEST FORM

PROPOSED FOR BOARD MEETING OF: February 2, 2016

DEPARTMENT: Human Resources Department

PREPARED BY: Kristine Cunningham, Human Resources Director

SUBJECT: Changes to Personnel Policy 4.03 – Overtime/Comp Time Calculations

### SPECIFIC ACTION REQUESTED:

Adoption of revisions to Personnel Policy 4.03. These revisions have been reviewed by Labor Counsel.

### DESCRIPTION OF ACTION (dollar amount, purpose):

In 2016, it is expected that the Department of Labor will amend the Fair Labor Standards Act (FLSA) and extend overtime eligibility by significantly increasing the salary threshold; which is one element for exempting employees from receiving overtime.

In general, the FLSA requires a covered employer to pay overtime to its employees for all hours worked over 40 in a workweek, unless that employee meets the salary and duties requirements of one or more of the overtime exemptions. For example, under existing law, an employee may be exempt from receiving overtime if the employee is paid at least \$23,660.00 per year.

The proposed changes to the FLSA would increase the salary threshold to \$50,440.00 per year. As a result, 100+ County employees currently exempt from overtime may become eligible for overtime.

In an effort to contain costs associated with these changes, the Human Resources and Finance Departments are recommending the following changes to overtime and compensatory calculations:

- 4.03 (A) (2) – Overtime Pay and Compensatory Time
  - Calculate overtime based on actual hours worked, excluding all leave time (vacation, sick, personal leave, and comp time used) from the calculation.
  - Change rounding down time for overtime calculation to 8 minutes or less – per the Department of Labor.
  
- 4.03 (A) (5) – Overtime Pay and Compensatory Time
  - Calculate compensatory time based on actual hours worked, excluding all leave time (vacation, sick, personal leave, and comp time used) from the calculation.
  
- 4.03 (A) (5) (b) – Overtime Pay and Compensatory Time
  - Change rounding down time to 8 minutes or less for compensatory time calculation – per the Department of Labor.

The updated policy is attached. The comprehensive review of the County Personnel Policy Manual is currently in progress.

TIME FRAME OF ACTION:

Effective 2/6/2016.

FUNDING SOURCE IF REQUIRED (Federal, State, or Local):

N/A

PERSONNEL IF REQUIRED:

(indicate if elimination or creation and list FTE; job title; grade; full-time salary range; account number; and, if known, position number)

N/A

NEW OR RENEWAL:

N/A

CONTACT PERSON WITH PHONE NUMBER:

Kristine Cunningham, 384-8100 or kdcunn@kalcounty.com

#### **Personnel Policy #4.03 (A) (2) – Overtime Pay and Compensatory Time**

Overtime pay shall be calculated on actual hours worked (~~including-excluding holiday,~~ personal, ~~and~~ vacation-~~leave,~~ ~~but-excluding~~ sick leave and compensatory time used) over forty (40) hours in a Saturday through Friday calendar week. Overtime shall not be ~~calculated-paid~~ for time worked less than ~~fifteen-eight (158)~~ minutes ~~in any one (1) day over forty (40) hours in a Saturday through Friday calendar week.~~

#### **Personnel Policy #4.03 (A) (5) – Overtime Pay and Compensatory Time**

Non-exempt employees may accrue compensatory time in lieu of payment for hours worked in excess of their standard work week schedule (~~inex~~cluding ~~holiday,~~ personal, ~~and~~ vacation-~~leave,~~ ~~but~~ ~~excluding~~ sick leave, and compensatory time used) subject to the following:

#### **Personnel Policy #4.03 (A) (5) (b) – Overtime Pay and Compensatory Time**

Compensatory time, in lieu of payment for additional work hours, shall not be accrued ~~on-for time~~ worked less than ~~fifteen-eight (158)~~ minutes ~~increments worked in any one (1) day over forty (40) hours in a Saturday through Friday calendar week.~~

**BOARD AGENDA REQUEST FORM**

PROPOSED FOR BOARD MEETING OF: February 2, 2016

DEPARTMENT: Human Resources Department

PREPARED BY: Kristine Cunningham, Human Resources Director

SUBJECT: Renewal of Recruitment Advertising Agreement – MLIVE Media Group

SPECIFIC ACTION REQUESTED:

Approve and sign TWO copies of an updated agreement for \$10,000 for online job posting package through MLIVE Media Group.

DESCRIPTION OF ACTION (dollar amount, purpose):

Various resources are used to communicate the County’s open positions to potential applicants in our market area. A combination of print and an online presence is necessary in order to capture the attention of applicants. MLIVE Media Group represents advertising for the Kalamazoo Gazette, Grand Rapids Press, Ann Arbor News, Bay City Times, Flint Journal, Jackson Citizen Patriot, Muskegon Chronicle, Saginaw News and MLIVE.com. The agreement provides us with a small discount when placing print ads and there is no penalty if we do not meet that level for the year.

TIME FRAME OF ACTION:

February 1, 2016 – January 31, 2017.

FUNDING SOURCE IF REQUIRED (Federal, State, or Local):

General Fund – 101-226-901.00

PERSONNEL IF REQUIRED:

(indicate if elimination or creation and list FTE; job title; grade; full-time salary range; account number; and, if known, position number)

N/A

NEW OR RENEWAL:

Renewal

CONTACT PERSON WITH PHONE NUMBER:

Kristine Cunningham, 384-8100 or kdcunn@kalcounty.com

**BOARD AGENDA REQUEST FORM**

**PROPOSED FOR BOARD MEETING OF: February 2, 2016**

**DEPARTMENT: Human Resources**

**PREPARED BY: Kristine Cunningham, Human Resources Director**

**SUBJECT: Flexible Benefit Plan Document Amendment**

**SPECIFIC ACTION REQUESTED:**

Approval of the attached Flexible Benefit Plan document.

**DESCRIPTION OF ACTION (dollar amount, purpose):**

Kalamazoo County has recently changed flexible spending account administration to a local firm, Arcadia Benefits Group. As a result of this change in administrators, it is necessary to restate our flexible benefit plan documents. There is no financial impact with the restatement of the plan documents, rather, this is a formality to ensure compliance with federal laws.

**TIME FRAME OF ACTION:**

Effective January 1, 2016

**FUNDING SOURCE IF REQUIRED (Federal, State or Local):**

N/A

**PROCUREMENT INFORMATION:**

N/A

**CONTACT PERSON WITH PHONE NUMBER:**

Kristine Cunningham, [kdcunn@kalcounty.com](mailto:kdcunn@kalcounty.com) or 269-384-8100 or Jean Michaud, [jmich@kalcounty.com](mailto:jmich@kalcounty.com) or 269-383-8953.

**DATE:** January 20, 2016  
**TO:** Kalamazoo County Board of Commissioners  
**FROM:** Ben Damerow  
**SUBJECT:** Workforce Development Board Alternate Appointment

We are requesting consideration and approval of the individual listed below for appointment as an Alternate member of the Workforce Development Board for Michigan Works! Southwest, serving Branch, Calhoun, Kalamazoo, and St. Joseph Counties.

This appointment is for an Alternate representative for the Michigan Department of Correction.

The time period for this appointment is for the balance of a term that began on July 1, 2015 and ends September 30, 2017.

<u>Name</u>	<u>Sector</u>	<u>Representing</u>	<u>Replacing</u>
Lisa Johansen Parole/Probation Supervisor	MI Dept of Corrections	Kalamazoo Parole/ Probation Office	Don Martin



**RESOLUTION HONORING**

**Mr. Jack Mekemson**

**WHEREAS**, Mr. Jack Mekemson has served with distinction on the Kalamazoo Metropolitan County Planning Commission (KMCP) from 1997 to 2015; and

**WHEREAS**, Mr. Mekemson served as the KMCP Vice-Chair for two years; and

**WHEREAS**, during Mr. Mekemson's time on the commission, the Kalamazoo Metropolitan County Planning Commission has diligently performed its role in supporting the future development of Kalamazoo County; and

**WHEREAS**, Mr. Mekemson helped promote sound land use planning throughout the County, protecting the historic and agricultural nature of the County; and

**WHEREAS**, we are better for his service; and

**NOW, THEREFORE, BE IT RESOLVED** that the Kalamazoo County Board of Commissioners does hereby recognize, with sincerest respect, the fine accomplishments of Mr. Mekemson and is deeply appreciative of all his many contributions to the Kalamazoo County Community.

STATE OF MICHIGAN            )  
  ) SS  
COUNTY OF KALAMAZOO    )

I, Timothy A. Snow, County Clerk/Register, do hereby certify that the foregoing is a true copy of a Resolution adopted by the Kalamazoo County Board of Commissioners at a regular session held on February 2, 2016.

\_\_\_\_\_  
Timothy A. Snow  
County Clerk/Register

9.

**BOARD AGENDA REQUEST FORM**

**PROPOSED FOR BOARD MEETING OF:** February 2, 2016  
**DEPARTMENT:** Office of the Prosecuting Attorney  
**PREPARED BY:** Lisa Henthorn, Administrator  
**SUBJECT:** FY1516 SWET Byrne Justice Grant Subcontract

**SPECIFIC ACTION REQUESTED:**

Approval and sign 3 originals of the Byrne Justice Assistance Grant (JAG) Program Subcontract for FY 2015-2016. The agreement is retroactive for the period of October 1, 2015 - September 30, 2016. The Byrne grant continues partial funding for one full-time Assistant Prosecutor to handle the criminal cases generated by the Southwest Enforcement Team (SWET). The Byrne grant will provide \$42,915.96 and SWET will provide the match and remaining balance for salaries and fringe. The FY 2015-2016 agreement with SWET to provide the remaining balance of salaries and fringes not reimbursed by the Byrne grant was approved by the KCBOC on January 19, 2016.

**DESCRIPTION OF ACTION (dollar amount, purpose):**

Need approval and required signatures.

**TIME FRAME OF ACTION:**

FY 2015-2016 (October 1, 2015 through September 30, 2016)

**FUNDING SOURCE IF REQUIRED (Federal, State, or Local):**

Michigan State Police Byrne Justice Assistance Grant (Byrne JAG) Program Subcontract. The agreement is for salary and fringe for Cory Johnson, Assistant Prosecutor.

**PERSONNEL IF REQUIRED:**

(indicate if elimination or creation and list FTE; job title; grade; full-time salary range; account number; and, if known, position number)

Assistant Prosecutor 1.0 FTE; K11; Acct. No. 101-229 & Position #10174-022

**NEW OR RENEWAL:**

Renewal

**ANY OTHER PERTINENT INFORMATION:**

None

**CONTACT PERSON WITH PHONE NUMBER:**

Lisa Henthorn, Administrator  
(269) 383-8965

R.

**BOARD AGENDA REQUEST FORM**

**PROPOSED FOR BOARD MEETING OF: February 2, 2016**

**DEPARTMENT: Sheriff's Office**

**PREPARED BY: Paul Matyas, Undersheriff**

**SUBJECT: Approval of Verizon Networkfleet Management Contract**

**SPECIFIC ACTION REQUESTED:**

Approve the hardware and service order with Verizon to provide the Sheriff's Office with a wireless fleet management program.

**DESCRIPTION OF ACTION (dollar amount, purpose):**

One time purchase cost of \$3,606.90 for vehicle hardware for 30 police cruisers. Monthly service charge is \$568.50. Total first year cost is \$10,428.90. Program monitors vehicle maintenance issues and driver behaviors leading to savings in fuel costs and vehicle maintenance.

**TIME FRAME OF ACTION:**

Immediately. Contract pricing is for one year however the program may be terminated at any time.

**FUNDING SOURCE IF REQUIRED (Federal, State, or Local):**

General Fund

**PERSONNEL IF REQUIRED:**

Existing Sheriff's Office personnel are assigned to the program.

**NEW OR RENEWAL OR AMENDMENT:**

New

**ANY OTHER PERTINENT INFORMATION:**

A Trend Analysis, or "test" was conducted by the Sheriff's Office and Verizon on five patrol vehicles between May and September 2015. Results indicated that a reduction of 3 hrs of excessive idle time saves \$351 per veh/yr (based on gas price of \$2.25 gal at the time of the analysis). Savings are also realized from early detection of maintenance issues which, if not detected early enough, can get costly i.e. transmission. Fuel economy alone is significant. Other features include alerts to administration of excessive speeds, and real time vehicle locator which is an excellent feature for maintenance.

**PROCUREMENT INFORMATION:**

**CONTACT PERSON WITH PHONE NUMBER:**

Paul Matyas, Undersheriff ph: 385-6176





V.

## BOARD OF COMMISSIONERS MEMORANDUM

**TO:** Board of Commissioners

**FROM:** Michelle Tombro Tracy, Assistant Corporation Counsel

**DATE:** January 26, 2016

**SUBJECT:** ADA Title II Compliance – Requesting Board Approval

These documents were presented to the Board at the Committee of the Whole on January 19, 2016 for discussion. Attached please find the ADA Title II Compliance documents to be adopted. Once approved, all of the documents will be placed on the county website, and will also be made available at all County offices. The ADA Notice will be posted throughout County facilities.

Title II of the Americans with Disabilities Act requires local government units to ensure that all of their programs and services are accessible to individuals with disabilities.

The Act applies to individuals with a disability that substantially limits one or more major life function. A disability can be mental or physical in nature. Examples of qualifying disabilities include; blindness or visual impairment, hearing loss or deafness, a diagnosed mental illness, or a physical impairment such as loss of use of legs or arms, need of a wheelchair, a walker or other mobility device. These are just a few examples of qualifying disabilities, and are certainly not a complete list.

The County is legally obligated to make reasonable accommodations to qualified individuals in the provision of all services and programs.

The County is required to have an ADA coordinator. In order to meet this requirement, the County Board of Commissioners will be asked to appoint the County Administrator to this role. The Administrator can then designate other individuals to actually perform this task.

The County is required to provide a copy of all ADA documents on the County Website. An ADA tab will be added to the main web page. All of the County ADA documents will be uploaded to this tab including the accommodation and grievance forms.

County facilities are required to have ADA Notices posted throughout their facility to inform the public of ADA requirements and their right to necessary accommodations.

The County is required to have a grievance procedure in place that includes a process for appeal. A procedure has been drafted and will be presented to the County Board for review and adoption. The procedure includes a grievance form which will be available on the web and in hard copy. The grievance will be reviewed and responded to by the ADA Coordinator. All appeals will be handled by the County Board.

In order to come into compliance with the requirements of Title II, I have prepared the following documents:

- Kalamazoo County ADA Policy
- Notice Under the Americans with Disabilities Act
- Request for Accommodations Form
- Grievance Policy
- Grievance Form

All internal ADA issues involving County employees will continue to be handled by the Human Resources Department utilizing personnel procedures.

Thank you for your time and consideration.

# KALAMAZOO COUNTY ADA POLICY

## REFERENCES:

- A. The Americans with Disabilities Act of 1990 (42 USC 12101 et. Seq.)
- B. The ADA Amendments Act of 2008
- C. Section 504 of the Rehabilitation Act of 1973
- D. The Michigan Deaf Persons Interpreters Act, 1982 PA 204
- E. The Michigan Handicapper Civil Rights Act, 1976 PA 20, as amended 1990
- F. The Elliott-Larsen Civil Rights Act, 1976 PA 453

## DEFINITIONS AND ABBREVIATIONS:

- A. "An individual with a disability" means a person covered by the Americans with Disabilities Act and other related state and federal law; and includes individuals who have a physical or mental impairment that substantially limits one or more of the major life activities; have a record of such impairment; or are regarded as having such impairment.
- B. "Qualified Individual with a Disability" means a person who meets the essential eligibility requirements for participation in a service or program provided by the County.
- C. "Accommodation(s)" may include, but are not limited to, making reasonable modifications in policies, practices, and procedures; furnishing, at no charge, to the qualified individuals with disabilities, auxiliary aids and services, which may include equipment, devices, materials in alternative formats, and qualified interpreters or readers; and making each service, program, or activity, when viewed in its entirety, readily accessible to and usable by qualified individuals with disabilities requesting accommodations. In order to ensure that County services are accessible, access may be provided by various methods including alteration of existing facilities, acquisition or construction of additional facilities, relocation of a service or program to an accessible facility, or provision of services at alternate sites. The County will consider the expressed choice of the individual requesting the accommodation to facilitate effective communication. The County will not place a surcharge on a particular individual or group of individuals to cover the cost of accommodation.
- D. "Policy" means the procedures set forth in this document regarding requests for accommodations by qualified individuals with disabilities.
- E. Confidentiality applies to the identity of the applicant in all oral or written communications, including all files and documents submitted by an applicant as part of the application process.

POLICY STATEMENT: It shall be the intent of the County of Kalamazoo to assure that qualified individuals with disabilities have equal and full access to the programs and services of Kalamazoo County Government. Nothing in this policy shall be construed to impose limitations or to invalidate the remedies, rights, and procedures accorded to any qualified individuals with disabilities under state or federal law.

PROCEDURES:

- A. The ADA Coordinator for the County shall be the County Administrator and/or his designee.
- B. The following procedure for requesting accommodations is established:
1. Applications requesting accommodations pursuant to this policy may be presented in writing, on the County Accommodation Request form. Applications should be made to the ADA Coordinator, Kalamazoo County Administrator. Applications may be submitted online at \_\_\_\_\_ via US Mail sent to: 201 W. Kalamazoo Ave., Kalamazoo MI 49007 or in person at 201 W. Kalamazoo Ave., Room 207, Kalamazoo MI 49007.
  2. All applications for accommodations shall include a description of the accommodation sought along with a statement of the functional impairment that necessitates such accommodation. The County in its discretion may require the applicant to provide additional information about the qualifying impairment.
  3. Applications should be made as far in advance of the requested accommodations implementation date as possible.
  4. Upon request, the County shall maintain the application form in a separate, confidential file so as not to reveal the identity or other information contained in the application for accommodation.
- C. Grant of accommodation. This County shall grant an accommodation as follows:
1. In determining whether to grant an accommodation and what accommodation to grant, the County shall consider, but is not limited by, the applicable provisions of the references identified in the "References" section of this policy.
  2. Within 5 business days of receipt of an application the County shall inform the applicant in writing, or other accessible format needed by the applicant, of the reasons a request for accommodation is either granted or denied.
- D. Denial of accommodation. This County shall grant an accommodation as follows:
1. The applicant has failed to satisfy the requirements of this policy; or
  2. The requested accommodations(s) would result in a fundamental alteration in the nature of the program, service or activity, or create an undue financial or administrative burden on the County.

If the request for accommodation is denied or if the accommodation does not successfully establish effective communication, the applicant may file a grievance in accordance with the County's established grievance procedure. Upon request, the County shall provide the applicant a copy of the County's established grievance procedure. The procedure is also available on the County Website at \_\_\_\_\_.

E. Review Procedure

An applicant whose request for accommodation has been denied or granted may seek review of a determination within 60 days of the date of the notice of denial or grant by submitting a request for review to the County ADA Coordinator.

F. Duration of accommodations

The accommodations by the County shall commence on the date indicated in the notice of accommodation and shall remain in effect for the period specified in the notice of accommodation. The County may grant accommodations for indefinite periods of time or for a particular service or program.

# NOTICE UNDER THE AMERICANS WITH DISABILITIES ACT

In accordance with the requirements of title II of the Americans with Disabilities Act of 1990 ("ADA"), the **County of Kalamazoo** will not discriminate against qualified individuals with disabilities on the basis of disability in its services, programs, or activities.

**Employment:** **County of Kalamazoo** does not discriminate on the basis of disability in its hiring or employment practices and complies with all regulations promulgated by the U.S. Equal Employment Opportunity Commission under title I of the ADA.

**Effective Communication:** **County of Kalamazoo** will generally, upon request, provide appropriate aids and services leading to effective communication for qualified persons with disabilities so they can participate equally in **County of Kalamazoo** programs, services, and activities, including qualified sign language interpreters, documents in Braille, and other ways of making information and communications accessible to people who have speech, hearing, or vision impairments.

**Modifications to Policies and Procedures:** **Kalamazoo County** will make all reasonable modifications to policies and programs to ensure that people with disabilities have an equal opportunity to enjoy all of its programs, services, and activities.

Anyone who requires an auxiliary aid or service for effective communication, or a modification of policies or procedures to participate in a program, service, or activity of the **County of Kalamazoo**, should contact the office of the ADA Coordinator, the **Kalamazoo County Administrator, 201 W. Kalamazoo Ave., Kalamazoo MI 49007** as soon as possible but no later than 4 business days before the scheduled event.

The ADA does not require the **County of Kalamazoo** to take any action that would fundamentally alter the nature of its programs or services, or impose an undue financial or administrative burden.

Complaints that a program, service, or activity of the **County of Kalamazoo** is not accessible to persons with disabilities should be directed to:

**ADA Coordinator**  
**Kalamazoo County Administrator**  
**201 W. Kalamazoo Avenue**  
**Kalamazoo MI 49007**

**Complaints may also be submitted in person at any County office or on the County website at [www.kalcounty.com/xxx](http://www.kalcounty.com/xxx) by clicking on the grievance form and filling it out.**

**County of Kalamazoo** will not place a surcharge on a particular individual with a disability or any group of individuals with disabilities to cover the cost of providing auxiliary aids/services or reasonable modifications of policy, such as retrieving items from locations that are open to the public but are not accessible to persons who use wheelchairs.

# **County of Kalamazoo Grievance Procedure under The Americans with Disabilities Act**

This Grievance Procedure is established to meet the requirements of the Americans with Disabilities Act of 1990 ("ADA"). It may be used by anyone who wishes to file a complaint alleging discrimination on the basis of disability in the provision of services, activities, programs, or benefits by the **County of Kalamazoo**. The **County's** Personnel Policy governs employment-related complaints of disability discrimination.

The complaint should be in writing and contain information about the alleged discrimination such as name, address, phone number of complainant and location, date, and description of the problem. Alternative means of filing complaints, such as personal interviews or a tape recording of the complaint will be made available for persons with disabilities upon request.

The complaint should be submitted by the grievant and/or his/her designee as soon as possible but no later than 60 calendar days after the alleged violation to:

**ADA Coordinator  
Kalamazoo County Administrator  
201 West Kalamazoo Avenue  
Kalamazoo MI 49007**

The complaint can be presented in person, sent via U.S. mail or submitted using the form available on the County website at [www.kalcounty.com/xxx](http://www.kalcounty.com/xxx)

Within 15 calendar days after receipt of the complaint, the *Kalamazoo County Administrator* or *a* designee will meet with the complainant to discuss the complaint and the possible resolutions. Within 15 calendar days of the meeting, the *Kalamazoo County Administrator* or *a* designee will respond in writing, and where appropriate, in a format accessible to the complainant, such as large print, Braille, or audio tape. The response will explain the position of the **County of Kalamazoo** and offer options for substantive resolution of the complaint.

If the response by the *Kalamazoo County Administrator* or *a* designee does not satisfactorily resolve the issue, the complainant and/or his/her designee may appeal the decision within 15 calendar days after receipt of the response to the **County Board of Commissioners**.

Within 15 calendar days after receipt of the appeal, the **County Board of Commissioners** will meet with the complainant to discuss the complaint and possible resolutions. Within 15 calendar days after the meeting, the **County Board of Commissioners** will respond in writing, and, where appropriate, in a format accessible to the complainant, with a final resolution of the complaint.

All written complaints received by the *Kalamazoo County Administrator*, appeals to the **County Board of Commissioners**, and responses from these two offices will be retained by the **County of Kalamazoo** for at least three years.



# COUNTY OF KALAMAZOO Americans with Disabilities Act Grievance Form

Please provide the following information:

1. Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-Mail address: \_\_\_\_\_

2. Date the aggrieved action occurred or was observed: \_\_\_\_\_

3. Name and location of the County program or service involved that is the subject of the complaint.

Name of program or service: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

4. Name(s) of the County employee representative with whom you made contact regarding the subject of this grievance:

\_\_\_\_\_  
\_\_\_\_\_

5. Describe why you believe you are the victim of discrimination on the basis of disability in the delivery of County programs and services.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Grievant

\_\_\_\_\_  
Date

W.

**RESOLUTION FOR MILLAGE RENEWAL PROPOSITION  
FOR COUNTYWIDE LAW ENFORCEMENT**

**WHEREAS**, the citizens of Kalamazoo County voted August 5, 1980 to increase the millage to be levied by 1.5 mills for the express purpose of enhancing Law Enforcement in Kalamazoo County and the millage was renewed in 1986, 1992, 1998, 2004 and again in 2010; and

**WHEREAS**, the Kalamazoo County Board of Commissioners committed to levy no more of the millage than was necessary as evidenced by the actual levies from 1980 through 2015; and

**WHEREAS**, the Headlee Amendment has reduced the 1.5 mills to 1.4491 mills; and

**WHEREAS**, the Kalamazoo County Board of Commissioners has determined that maintaining current levels of Law Enforcement paid for by County Government is essential to the quality of life and economic future of Kalamazoo County; and

**WHEREAS**, the County Board has determined that it is necessary to seek continuation of this millage for the purpose of averting reductions in Law Enforcement in Kalamazoo County; and

**WHEREAS**, without continuation of this millage, major service reductions will occur; and

**WHEREAS**, Article IX, Section 6, of the 1963 Michigan Constitution authorizes the Kalamazoo Board of Commissioners to place upon the ballot a request for additional millage on the taxable valuation of all property in the County of Kalamazoo.

**NOW, THEREFORE, BE IT RESOLVED** that the following question shall be placed on the ballot for consideration of the electorate on May 3, 2016, and that the form of the question shall be as follows:

**COUNTYWIDE LAW ENFORCEMENT  
AND  
SAFETY MILLAGE PROPOSITION**

*This proposal will permit the County to restore 1.4491 mills of the 1.5 mills for Law Enforcement, now expired, for six (6) years (2016-2021).*

"For the purposes of maintaining portions of the Law Enforcement and Safety functions for the citizens of Kalamazoo County in the areas of Prosecuting Attorney, Sheriff, Circuit Court Trial and Family Divisions, District Court, Animal Services and Enforcement Department, and Community Corrections, shall the limitation on the amount of taxes which may be imposed on taxable property in Kalamazoo County be increased by 1.4491 mills (\$1.4491 per \$1,000 of taxable value) on all taxable property in Kalamazoo County for a period of six (6) years, being 2016 to 2021, inclusive. It is

